JAN 1 7 2001

PATENT Old Attorney Docket: 066112.999A

New Attorney Docket: 031838.0006

10-17-01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application Of:)	JAN 2
Scott A. MOSKOWITZ et al) Group Art Unit: 2131	Technology Center 2100
Application Number: 09/671,739) Examiner: To be assigned	"Iller 2100
Filed: September 29, 2000)	

PRELIMINARY AMENDMENT

METHOD AND DEVICE FOR MONITORING AND ANALYZING SIGNALS

Commissioner of Patents Washington, D.C. 20231

Sir:

For:

Prior to an examination on the merits, please amend the above-referenced patent application as follows:

IN THE CLAIMS:

Please add new claims 49-61, as follows:

--49. The system of claim 1, wherein the abstract is created by:

determining invariant characteristics for the reference signal;

selecting the invariant characteristics that have a minimum variation with the stored abstracts in the reference database; and

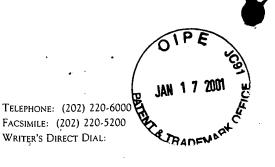
defining a null case as a minimum variation from all stored abstracts in the reference database.

50. The method of claim 41, wherein the step of creating an abstract for a first digital signal comprises:

determining invariant characteristics for the first digital signal;

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01 FC:202 02 FC:203 40.00 OP 117.00 OP





JAN 2 4 2001 Technology Center 2100

1333 H STREET N.W. SUITE 800

Washington, D.C. 20005

January 16, 2001

In re Patent Application of:

Old Attorney Docket No.:

066112.999A

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Scott A. MOSKOWITZ et al.

Application No.:

09/671,739

Group Art Unit:

2131

Filed:

September 29, 2000

Title:

METHOD AND DEVICE FOR

MONITORING AND ANALYZING

Examiner:

Unassigned

SIGNALS

Commissioner for Patents Washington, D.C. 20231

Transmitted herewith is an amendment in the above-identified application. Fees have been calculated as shown below:

			CLA	IMS AS AMENDE	D			
			Claims Remaining After	Highest Number Previously Paid		Rate		
			Amendment	For	Extra	Large Entity	Small Entity	Amount
Number of Claims in Excess of 20		62	48	13	\$ 18.00	\$ 9.00	\$ 117.00	
Independent Claims in Excess of 3		5	4	1	\$ 80.00	\$ 40.00	\$40.00	
First Presentation	n of M	ultiple Depend	dent Claims			\$ 270.00	\$ 135.00	\$ 0.00
Extension Fee:	a) b) c) d) e)	One Month Two Month Three Mont Four Month Five Month	hs s			\$ 110.00 \$ 390.00 \$ 890.00 \$1390.00 \$1890.00	\$ 55.00 \$ 195.00 \$ 445.00 \$ 695.00 \$ 945.00	\$ 0.00
Other:		•						\$ 0.00
TOTAL FEE DUE						\$157.00		

	No additional fee is required.
$\overline{\boxtimes}$	A check in the amount of \$ 157.00 is attached.
	Charge \$ to Deposit Account No. 50-1640.
	Charge any additional fees or credit any overpayment to Deposit Account No. 50-1640.
	Small Entity Status Claim:
	is attached.
\boxtimes	is of record in this application.
	Respectfully submitted,

By:

Floyd B. Chapman Registration No. 40,555